Fill in this information	on to identify	your case and	this filin	g:				
Debter 4	wona Perna	•						
	irst Name		dle Name	Last Name				
Debtor 2								
(Spouse, if filing) F	irst Name	Mido	dle Name	Last Name				
United States Bankru	ptcy Court for	the: EASTERN	<u> </u>	ICT OF PENNSYLVANIA				
Case number 2:23	-bk-13081							Check if this is a amended filing
Official Form Schedule								12/15
Answer every question.  Part 1: Describe Each	Residence, B	uilding, Land, or C	Other Rea	his form. On the top of any addition I Estate You Own or Have an Interd dence, building, land, or similar p	est In	, , , , , , , , , , , , , , , , , , , ,		(
1.1  241 W. Fornal  Street address, if avai		reription	_ 🗵	Duplex or multi-unit building Condominium or cooperative		the amoun	t of any secure	nims or exemptions. Put d claims on Schedule D: ns Secured by Property.
Norristown	PA	19401		Land		Current va	perty?	Current value of the portion you own?
City	State	ZIP Code		Timeshare Other		Describe t	ee simple, ten	\$207,483.00 our ownership interest ancy by the entireties, o
				has an interest in the property? C	heck one		e), if known. by the Ent	ireties
Montgomery			L	•				
County			_	Debtor 2 only  Debtor 1 and Debtor 2 only				
oca.n.y			□ □	•	other		k if this is com structions)	munity property
			Othe	r information you wish to add abo erty identification number:		`	,	
				your entries from Part 1, incluer here				\$207,483.00

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Part 2: Describe Your Vehicles

De	ebtor 1 <u>Iv</u>	wona Perna			Case number (if known)	2:23-bk-13081
3.	Cars, vans	s, trucks, trac	ctors, sport utility v	ehicles, motorcycles		
_	_	-,,	<b>,</b> .			
	_l No					
4	⊠ Yes					
					Do not deduct sec	ured claims or exemptions. Put
3	.1 Make:	200		Who has an interest in the property? Check one		secured claims on Schedule D:
	Model:	Chrysler		☐ Debtor 1 only	Creditors Who Ha	ve Claims Secured by Property.
	Year:	2016		☐ Debtor 2 only	Current value of	the Current value of the
		mate mileage:	35000	Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other in	formation:				
					\$10,504	1.00 \$10,504.00
				☐ Check if this is community property (see instructions)	<u> </u>	<u> </u>
_						
				nd other recreational vehicles, other vehicle		
E	:xamples: E	Boats, trailers,	motors, personal wa	tercraft, fishing vessels, snowmobiles, motorcy	cle accessories	
D	⊠ No					
	Yes					
Ī	_					
5	Add the de	ollar value of	the portion you ow	n for all of your entries from Part 2, includin	ng any entries for	
				that number here		\$10,504.00
						-
Pa	rt 3: Descri	ibe Your Perso	nal and Household I	tems		
				terest in any of the following items?		Current value of the
	,		- <b>3 -</b>	<b>,,</b>		portion you own?
						Do not deduct secured
6.	Househol	d goods and	furnishings			claims or exemptions.
			ces, furniture, linens	, china, kitchenware		
	□ No					
	⊠ Yes. D	escribe	Hausahald Cas	do		¢4 000 00
			Household Goo	008		\$4,000.00
7.	Electronic	_				
	Examples:			eo, stereo, and digital equipment; computers, p	rinters, scanners; music c	collections; electronic devices
	□ No	including cell	priories, cameras, ir	nedia players, games		
	Yes. D	escribe				
			TVs, Cell Phone	)		\$1,000.00
_						
Ω	Collectible	es of value				
0.			figurines; paintings,	prints, or other artwork; books, pictures, or other	er art objects; stamp, coin	, or baseball card collections;
	_		ons, memorabilia, co		, , , , , , , , , , , , , , , , , , , ,	
	⊠ No					
	☐ Yes. D	escribe				
9.	Equipmen	it for sports a	and hobbies			
	Examples:			nd other hobby equipment; bicycles, pool tables	, golf clubs, skis; canoes	and kayaks; carpentry tools;
	⊠ No	musical instru	uments			
	_	escribe				
10.	Firearms					
	Examples ⊠ No	i: Pistois, rifles	s, snotguns, ammuni	tion, and related equipment		
	☐ Yes. D	escribe				
		==				
11.	Clothes	v Evonidov -li	othoo furo loothar -	nata dagignar waar ahaan aanaaniin		
	Examples  ☐ No	s. ⊏veryday clo	omes, iurs, leatner co	oats, designer wear, shoes, accessories		
	⊠ Yes D	)escribe				

Official Form 106A/B Schedule A/B: Property page 2

Debtor 1	Iwona Perna	1		Case number (if known)	2:23-bk-13081
		Misce	llaneous Clothin	g	\$1,000.00
⊠ No	•	welry, co	stume jewelry, enga	gement rings, wedding rings, heirloom jewelry, watches, gems,	gold, silver
<i>Exam</i> ⊠ No	farm animals  ples: Dogs, cats,  Describe	birds, hoi	rses		
⊠ No	other personal a		•	d not already list, including any health aids you did not list	
				Part 3, including any entries for pages you have attached	\$6,000.00
	escribe Your Finan wn or have any I			n any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
⊠ No	ples: Money you		our wallet, in your ho	ome, in a safe deposit box, and on hand when you file your petit	ion
<i>Exam</i> ☐ No				ounts; certificates of deposit; shares in credit unions, brokerage s with the same institution, list each.  Institution name:	houses, and other similar
		17.1.	Checking	Truist Bank	\$1,357.12
		17.2.	Checking	PNC Bank	\$60.00
		17.3.	Savings	TruMark FCU	\$10.00
<i>Exam</i> ⊠ No	ples: Bond funds,			okerage firms, money market accounts	
 19. <b>Non-</b>	publicly traded s	tock and	Institution or issuer	name: porated and unincorporated businesses, including an intere	est in an LLC, partnership,
⊠ No			n about themn		
Negot _Non-n	tiable instruments	include p	ersonal checks, cas	optiable and non-negotiable instruments shiers' checks, promissory notes, and money orders. ansfer to someone by signing or delivering them.	
⊠ No □ Yes.	. Give specific info	ormation	about them		
		Issi	uer name:		

Official Form 106A/B Schedule A/B: Property page 3

De	ebtor 1 <u>Iwona Perr</u>	na		Case number (if known)	2:23-bk-13081
21.	Retirement or pensing Examples: Interests in No		), 403(b), thrift savings accounts, or	r other pension or profit-sharing	plans
	Yes. List each acco	ount separately. Type of account: 401(k)	Institution name: TIAA		\$0.00
		401(k)	Fidelity		\$0.00
		sed deposits you have made	so that you may continue service c nt, public utilities (electric, gas, wate Institution name or individ	er), telecommunications compar	nies, or others
23.	⊠ No	ct for a periodic payment of m Issuer name and description.	noney to you, either for life or for a r	number of years)	
24.	26 U.S.C. §§ 530(b)(1) ☑ No	), 529A(b), and 529(b)(1).	a qualified ABLE program, or und		
	⊠ No	r future interests in property	y (other than anything listed in lii	ne 1), and rights or powers ex	ercisable for your benefit
	Examples: Internet do  ☑ No		s, and other intellectual property seeds from royalties and licensing a	igreements	
27.	Examples: Building p  ☑ No	es, and other general intang ermits, exclusive licenses, co information about them	gibles poperative association holdings, liqu	uor licenses, professional licens	es
Me	oney or property owed	d to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
	Tax refunds owed to  ☑ No ☐ Yes. Give specific in		ding whether you already filed the re	eturns and the tax years	
	Family support  Examples: Past due o  ☑ No ☐ Yes. Give specific ir		al support, child support, maintenan	ce, divorce settlement, property	r settlement
	Other amounts som Examples: Unpaid wa benefits; u  No Yes. Give specific	ages, disability insurance pay unpaid loans you made to sor	rments, disability benefits, sick pay, meone else	, vacation pay, workers' compe	ensation, Social Security
	☑ No			nomeowner's, or renter's insural Beneficiary:	nce Surrender or refund value:
32.		perty that is due you from si iary of a living trust, expect pr	comeone who has died roceeds from a life insurance policy	y, or are currently entitled to rec	eive property because

Del	otor 1	Iwona Perna		Case number (if known)	2:23-bk-13081
[	☐ Yes.	Give specific information			
	<i>Exampi</i> ⊠ No	against third parties, whether or not you have filed a la les: Accidents, employment disputes, insurance claims, or ri		and for payment	
L	_ Yes.	Describe each claim			
	⊠ No	contingent and unliquidated claims of every nature, incl  Describe each claim	uding counterclaims	of the debtor and rights t	to set off claims
	<b>_</b> 163.	Describe each claim			
	Any fir ⊠ No	nancial assets you did not already list			
	=	Give specific information			
36.		ne dollar value of all of your entries from Part 4, includin rt 4. Write that number here			\$1,427.12
Par	5: Des	cribe Any Business-Related Property You Own or Have an Inter	est In. List any real esta	te in Part 1.	
	<b>Do you</b> o	own or have any legal or equitable interest in any business-relat	ed property?		
	_	Go to line 38.			
_					
Par		cribe Any Farm- and Commercial Fishing-Related Property You u own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	t In.	
16	Do you	ı own or have any legal or equitable interest in any farm	- or commercial fishi	ng-related property?	
+0.		Go to Part 7.	- Of Commercial fishing	ng-related property:	
	☐ Yes.	Go to line 47.			
Par	t 7:	Describe All Property You Own or Have an Interest in That You	Did Not List Above		
53.	Examp	I have other property of any kind you did not already lises: Season tickets, country club membership	1?		
-	⊠ No ∃ Yes. (	Give specific information			
-	_				
54.	Add th	ne dollar value of all of your entries from Part 7. Write th	at number here		\$0.00
Par	t 8:	List the Totals of Each Part of this Form			
55.	Part 1	: Total real estate, line 2			\$207,483.00
56.	Part 2	: Total vehicles, line 5	\$10,504.00		<u> </u>
57.	Part 3	: Total personal and household items, line 15	\$6,000.00		
58.	Part 4	: Total financial assets, line 36	\$1,427.12		
59.	Part 5	: Total business-related property, line 45	\$0.00		
60.	Part 6	: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7	: Total other property not listed, line 54 +	\$0.00		
62.	Total <sub>I</sub>	personal property. Add lines 56 through 61	\$17,931.12	Copy personal property t	otal <b>\$17,931.12</b>
63.	Total	of all property on Schedule A/B. Add line 55 + line 62			\$225,414.12

Official Form 106A/B Schedule A/B: Property page 5

Fill in this infor	mation to identify your	case:		
Debtor 1	Iwona Perna			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F PENNSYLVANIA	
Case number	2:23-bk-13081			
(if known)				Check if this is an amended filing
				<del></del>

#### Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Pa	Part 1: Identify the Property You Claim as Exempt								
1.	Which set of exemptions are you claiming	? Check one only, eve	า if yo	ur spouse is filing with you.					
		kruptcy exemptions.	11 U	J.S.C. § 522(b)(3)					
	☐ You are claiming federal exemptions. 1	1 U.S.C. § 522(b)(2)							
2.	For any property you list on Schedule A/B	any property you list on Schedule A/B that you claim as exempt, fill in the information below.							
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption				
		Copy the value from Schedule A/B	Check only one box for each exemption.						
	241 W. Fornance Street, Norristown,	\$207,483.00	$\boxtimes$	\$90,504.00	11 U.S.C. § 522(b)(3)(B)				
	PA 19401 Montgomery County Line from <i>Schedule A/B</i> : 1.1			100% of fair market value, up to any applicable statutory limit					
	2016 200 Chrysler 35000 miles	\$10,504.00		\$10,504.00	11 U.S.C. § 522(b)(3)(B)				
	Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit					
	Household Goods	\$4,000.00	$\boxtimes$	\$4,000.00	11 U.S.C. § 522(b)(3)(B)				
	Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit					
	TVs, Cell Phone	\$1,000.00	$\boxtimes$	\$1,000.00	11 U.S.C. § 522(b)(3)(B)				
	Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit					
	Miscellaneous Clothing	\$1,000.00	$\boxtimes$	\$1,000.00	42 Pa.C.S. § 8124(a)(1)				
	Line from Schedule A/B: 11.1			100% of fair market value, up to any applicable statutory limit					

De	btor 1 Iwona Perna			Case number (if known)	2:23-bk-13081		
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim  Specific laws that allow exemption  Check only one box for each exemption.				
		Copy the value from Schedule A/B	Crie	ck only one box for each exemption.			
	Truist Bank	\$1,357.12	$\boxtimes$	\$1,357.12	11 U.S.C. § 522(b)(3)(B)		
	Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit			
	PNC Bank	\$60.00	$\boxtimes$	\$60.00	42 Pa.C.S. § 8123(a)		
	Line from Schedule A/B: 17.2			100% of fair market value, up to any applicable statutory limit			
	TruMark FCU	\$10.00	$\boxtimes$	\$10.00	42 Pa.C.S. § 8123(a)		
	Line from Schedule A/B: 17.3			100% of fair market value, up to any applicable statutory limit			
	TIAA	\$0.00	$\boxtimes$	\$0.00	42 PA C.S. § 8124(b)(1)(ix)		
	Line from Schedule A/B: 21.1			100% of fair market value, up to any applicable statutory limit			
	Fidelity 24.0	\$0.00		\$0.00	42 PA C.S. § 8124(b)(1)(ix)		
	Line from Schedule A/B: 21.2			100% of fair market value, up to any applicable statutory limit			
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/25 and every	3 years after that for ca	ises fi	•	,		
	Yes. Did you acquire the property covered No	ed by the exemption wi	thin 1	,215 days before you filed this case?	?		
	☐ Yes						

Fill in this information to identify yo	ur case:				
Debtor 1 Iwona Perna First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, filing) First Name	Middle Name	Last Name			
United States Bankruptcy Court for the	EASTERN DISTRICT OF PENNS	SYI VANIA			
	ENOTE IN DISTINCT OF TENNIO	71271111			
Case number 2:23-bk-13081					if this is an ded filing
				amene	ica iiiiig
Official Form 106D		_			
Schedule D: Creditors	S Who Have Claims S	<u>ecured</u>	by Propert	У	12/15
Be as complete and accurate as possible. needed, copy the Additional Page, fill it ou known).					
Do any creditors have claims secured b	y your property?				
<ul><li>☐ No. Check this box and submit</li><li>☑ Yes. Fill in all of the information</li></ul>	this form to the court with your other so below.	chedules. You	u have nothing else	to report on this form.	
Part 1: List All Secured Claims					
2. List all secured claims. If a creditor has			Column A	Column B	Column C
for each claim. If more than one creditor hamuch as possible, list the claims in alphabet	•	n Part 2. As	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 Loan Depot	Describe the property that secures the	claim:	\$82,573.00	\$207,483.00	\$0.00
Creditor's Name	241 W. Fornance Street, Norri	stown,			
	Montgomery County				
PO Box 77404	As of the date you file, the claim is: Ch apply.	eck all that			
Trenton, NJ 08628  Number, Street, City, State & Zip Code	☐ Contingent ☐ Unliquidated				
	Disputed				
Who owes the debt? Check one.  ☐ Debtor 1 only	Nature of lien. Check all that apply.  ☐ An agreement you made (such as mo	rtagao or sociii	rod		
Debtor 2 only	car loan)	0 0	leu		
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	<ul><li>☐ Statutory lien (such as tax lien, mecha</li><li>☐ Judgment lien from a lawsuit</li></ul>	ınic's lien)			
Check if this claim relates to a	= ~	irst Mortga	ige		
community debt	<u>-</u>	<u></u>	-3-		
Date debt was incurred 02/26/2013	Last 4 digits of account number	r <u>7637</u>			
TruMark Financial Credit					
Union	Describe the property that secures the		\$34,406.00	\$207,483.00	\$0.00
Creditor's Name	241 W. Fornance Street, Norri	stown,			
335 Commerce Drive	PA 19401 Montgomery County				
PO Box 8127	As of the date you file, the claim is: Ch	eck all that			
Fort Washington, PA 19034	apply.				
Number, Street, City, State & Zip Code	☐ Contingent ☐ Unliquidated				
	Disputed				
Who owes the debt? Check one.  ☐ Debtor 1 only	Nature of lien. Check all that apply.  ☐ An agreement you made (such as mo	rtagae or secu	red		
Debtor 2 only	car loan)		ica		
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	<ul><li>☐ Statutory lien (such as tax lien, mecha</li><li>☐ Judgment lien from a lawsuit</li></ul>	ınıc's lien)			
Check if this claim relates to a community debt		IELOC			
Date debt was incurred 08/11/2021	Last 4 digits of account number	r <u>0002</u>			
Add the dollar value of your entries in 0	Column A on this page. Write that numbe	r here:	\$116,97	79.00	
			\$110,01		

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$116,979.00

Debtor 1	otor 1 <b>Iwona Perna</b>			Case number (if known)	2:23-bk-13081	
	First Name	Middle Name	Last Name			

#### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Fill in tl	his information to identify your ca	ase:			
Debtor	1 Iwona Perna				
Debioi	First Name	Middle Name	Last Name		
Debtor 2	2				
(Spouse if	, filing) First Name	Middle Name	Last Name		
United S	States Bankruptcy Court for the:	EASTERN DISTRICT OF	PENNSYLVANIA		
Case nu	umber <b>2:23-bk-13081</b>				
(if known)					☐ Check if this is an
					amended filing
Officia	al Form 106E/F				
					40/45
Sche	dule E/F: Creditors Wh	io Have Unsecu	red Claims		12/15
Schedule Schedule left. Attac	G: Executory Contracts and Unexpire D: Creditors Who Have Claims Secur	ed Leases (Official Form 10 ed by Property. If more spa	6G). Do not include ce is needed, copy	any creditors with partially s the Part you need, fill it out, i	Property (Official Form 106A/B) and on ecured claims that are listed in number the entries in the boxes on the op of any additional pages, write your
Part 1:	List All of Your PRIORITY Uns	ecured Claims			
1. Do a	any creditors have priority unsecured	claims against you?			
⊠ N	lo. Go to Part 2.				
□Y	es.				
<b>D</b> 40					
Part 2:	List All of Your NONPRIORITY	Unsecured Claims			
3. Do a	any creditors have nonpriority unsecu	red claims against you?			
	lo. You have nothing to report in this part	. Submit this form to the cour	t with your other sche	dules.	
⊠Y	es.				
unse	all of your nonpriority unsecured clai cured claim, list the creditor separately f one creditor holds a particular claim, list	or each claim. For each claim	listed, identify what t	ype of claim it is. Do not list cla	aims already included in Part 1. If more aims fill out the Continuation Page of Part
					Total claim
4.1	Bank of America	Last 4 digits of	of account number	9349	\$3,953.00
	Nonpriority Creditor's Name				
	PO Box 982238	When was the	e debt incurred?	08/10/2018	
-	El Paso, TX 79998-2235	A 641 1-4-			
	Number Street City State Zip Code	As of the date	you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.  ☑ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidate			
	Debtor 1 and Debtor 2 only	☐ Disputed	u		
	☐ At least one of the debtors and anoth	•	PRIORITY unsecured	d claim:	
	☐ Check if this claim is for a comm				
	debt	• —		ration agreement or divorce the	at you did not
	Is the claim subject to offset?	report as prior	•		
	⊠ No	•	·	g plans, and other similar debt	3
	☐ Yes	☑ Other. Spe	cify		

Debtor	1 Iwona Perna		Case number (if known)	2:23-bk-13081
4.2	Capital One	Last 4 digits of account number	4131	\$1,753.33
	Nonpriority Creditor's Name PO Box 31293 Sold Loke City LLT 94424	When was the debt incurred?	12/09/2013	
	Salt Lake City, UT 84131  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☑ Debtor 1 only ☐ Debtor 2 only	☐ Contingent ☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community	☐ Disputed  Type of NONPRIORITY unsecure  ☐ Student loans	d claim:	
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	•	•
	⊠ No □ Yes	☐ Debts to pension or profit-sharin ☐ Other. Specify	g plans, and other similar del	ots
4.3	CitiCards CBNA	Last 4 digits of account number	5561	\$2,955.00
	Nonpriority Creditor's Name 5800 South Corporate Place Sioux Falls, SD 57108	When was the debt incurred?	12/01/2022	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	□ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa	ration agreement or divorce t	hat you did not
	⊠ No	report as priority claims  Debts to pension or profit-sharin	a plane, and other similar del	nte.
	Yes	Other. Specify	g plans, and other similar del	
4.4	PNC Bank Card Services	Last 4 digits of account number	6893	\$4,008.08
	Nonpriority Creditor's Name PNC CB Investigations PO Box 5580	When was the debt incurred?	03/02/2022	
	C Cleveland, OH 44101 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	•	.o. oook all mat app.,	
	☑ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans		
	ls the claim subject to offset?	Obligations arising out of a separe report as priority claims	ration agreement or divorce t	hat you did not
	⊠ No	Debts to pension or profit-sharin	o plans, and other similar del	ots
	☐ Yes	M 0 11	g plans, and other similar der	,,,,

Debtor 1 _	lwona Pei	rna		Case nu	umber (if known)	2:23-bk-130	31
	NCB/TJX		Last 4 digits of account number	5326		_	\$1,324.27
PC	npriority Cred  D Box 717	37	When was the debt incurred?	09/07	7/2021		
Nur	mber Street (	a, PA 19176 City State Zip Code he debt? Check one.	As of the date you file, the claim	is: Check	all that apply		
	Debtor 1 only		☐ Contingent				
	Debtor 2 only	•	☐ Unliquidated				
	•	y I Debtor 2 only	☐ Disputed				
		of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
_		s claim is for a community	☐ Student loans	u 0.u			
deb		,	☐ Obligations arising out of a sepa	aration ag	reement or divorce	that you did not	
ls ti	he claim sul	bject to offset?	report as priority claims	3		•	
⊠ !	No		☐ Debts to pension or profit-sharing	ıg plans, a	and other similar de	bts	
□,	Yes		Other. Specify				
<del></del>							
	D Bank N.Anpriority Cred		Last 4 digits of account number	4116		_	\$7,419.00
		a Point Pkwy	When was the debt incurred?	08/21	I/2017		
	ıilding B	•					
Gr	eenville,	SC 29602					
		City State Zip Code	As of the date you file, the claim	is: Check	all that apply		
	Debtor 1 only	he debt? Check one.	☐ Contingent				
	Debtor 2 only	•	☐ Unliquidated				
		y I Debtor 2 only	☐ Disputed				
		of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
		s claim is for a community	☐ Student loans	u olulli.			
deb		o ciamin io ioi a community	☐ Obligations arising out of a sepa	aration ag	reement or divorce	that you did not	
ls ti	he claim sul	bject to offset?	report as priority claims				
⊠ 1	No		☐ Debts to pension or profit-sharin	ıg plans, a	and other similar de	bts	
	Yes		☑ Other. Specify				
Part 3:	List Others	s to Be Notified About a Debt 1	That You Already Listed				
			it your bankruptcy, for a debt that y	rou alrea	dy listed in Parts	1 or 2 For oxample	if a collection agency
is trying to	o collect fro	m you for a debt you owe to some	one else, list the original creditor in	Parts 1	or 2, then list the	collection agency I	nere. Similarly, if you
		in Parts 1 or 2, do not fill out or su	ou listed in Parts 1 or 2, list the addi ubmit this page.	itional cre	ealtors nere. It yol	i do not nave addi	ionai persons to be
Part 4:	Add the An	nounts for Each Type of Unse	cured Claim				
			s. This information is for statistical	reporting	g purposes only. 2	8 U.S.C. §159. Add	the amounts for each
type of un	secured cla	im.					
					Total	Claim	
	6a.	Domestic support obligations		6a.	\$	0.00	
Total claims		_					
from Part 1	6b.	Taxes and certain other debts yo	_	6b.	\$		
	6c.	Claims for death or personal inju	ry while you were intoxicated	6c.	\$	0.00	
	6d.	Other. Add all other priority unsecu	red claims. Write that amount here.	6d.	\$	0.00	
	0-	Tatal Britanita - Add lines Cathornel	- 0.1	0 -			
	6e.	Total Priority. Add lines 6a through	n 6d.	6e.	\$	0.00	
					Total	Claim	
	6f.	Student loans		6f.	\$	0.00	
Total claims from Part 2		Obligations arising out of a sepa	ration agreement or divorce that				
	~g.	you did not report as priority clai		6g.	\$	0.00	
	6h.	Debts to pension or profit-sharin	g plans, and other similar debts	6h.	\$ _	0.00	
	6i.	Other. Add all other nonpriority uns	secured claims. Write that amount	6i.		24 440 00	
		here.			\$	21,412.68	_
	6j.	Total Nonpriority. Add lines 6f thro	ough 6i.	6j.	\$	21,412.68	

Fill in this infor	mation to identify your	case:		
Debtor 1	Iwona Perna			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F PENNSYLVANIA	
Case number (if known)	2:23-bk-13081			Check if this is an amended filing

### Official Form 106G

### **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form. ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B:Property* (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	whom you have the r, Street, City, State and ZIP	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
2.2	City		State	ZIP Code	_
2.2	Name				_
	Number	Street			<del>_</del>
	City		State	ZIP Code	
2.3	·				
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				
	Number	Street			_
	City		State	ZIP Code	<del>_</del>

Fill in thi	s information to identify your	case:			
Debtor 1	Iwona Perna				
Debtor 2	First Name	Middle Name	Last Name	_	
(Spouse if, f	iling) First Name	Middle Name	Last Name		
United St	tates Bankruptcy Court for the:				
Case nur (if known)	nber <b>2:23-bk-13081</b>				☐ Check if this is an amended filing
	al Form 106H	obtoro			
Scrie	dule H: Your Cod	eptors			12/15
people ar fill it out,	e filing together, both are equ	ally responsible for supposes on the left. Attach	olying correct information the Additional Page to	n. If more space is	rate as possible. If two married needed, copy the Additional Page, op of any Additional Pages, write
1. Do	you have any codebtors? (If	you are filing a joint case,	do not list either spouse as	s a codebtor.	
□ No ⊠ Ye					
2. <b>W</b> i	ithin the last 8 years, have you ona, California, Idaho, Louisiana,				
_	o. Go to line 3. es. Did your spouse, former spot	use, or legal equivalent live	e with you at the time?		
in lin Forn	ne 2 again as a codebtor only i	f that person is a guaran	tor or cosigner. Make su	re you have listed	ng with you. List the person shown the creditor on Schedule D (Official , Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and Zl	P Code		Column 2: The cr Check all schedu	reditor to whom you owe the debt les that apply:
3.1	James G. Perna 241 W. Fornance Street Norristown, PA 19401			<ul><li>Schedule D,</li><li>Schedule E/F</li><li>Schedule G</li><li>Loan Depot</li></ul>	-, line
3.2	James G. Perna 241 W. Fornance Street Norristown, PA 19401				<sup>-</sup> , line

Fill	in this information to identify your ca	ase:				
Del	otor 1 <u>Iwona Perna</u>	ı				
	btor 2 buse, if filing)					
Uni	ited States Bankruptcy Court for the	: EASTERN DISTRICT	OF PENNSYLVANIA	<u> </u>		
	2:23-bk-13081			l _		I filing nt showing postpetition chapter s of the following date:
$\mathbf{O}$	fficial Form 106I				MM / DD/ YY	
	chedule I: Your Inc	ome			IVIIVI / DD/ T I	12/1
sup spo atta	as complete and accurate as possible plying correct information. If you use. If you are separated and you ch a separate sheet to this form.  11: Describe Employment	are married and not filing wi	ng jointly, and your ith you, do not inclu	spouse is living vide information al	vith you, inclu oout your spo	de information about your use. If more space is needed,
•	information.		Debtor 1		Debtor 2	or non-filing spouse
	If you have more than one job, attach a separate page with information about additional employers.	Employment status			⊠ Employ □ Not em	•
	Include part-time, seasonal, or	Occupation	Patient Access	Analysis	Bus Driv	⁄er
	self-employed work.	Employer's name	Einstein Health	Hetwork	Easton (	Coach Company LLC
	Occupation may include student or homemaker, if it applies.	Employer's address	5501 Old York F Philadelphia, PA			nroy Place PA 18040
		How long employed t	here? <u>27 Yea</u> ı	rs		Years
Pai	t 2: Give Details About Mor	nthly Income				
	mate monthly income as of the da	te you file this form. If yo	ou have nothing to rep	port for any line, wr	ite \$0 in the spa	ace. Include your non-filing spou
,	u or your non-filing spouse have mo e space, attach a separate sheet to		ombine the informatio	n for all employers	for that persor	n on the lines below. If you need
				For	Debtor 1	For Debtor 2 or non-filing spouse
2.	List monthly gross wages, sala deductions). If not paid monthly,			2. \$	3,414.88	\$\$
3.	Estimate and list monthly overt	ime pay.		3. +\$	0.00	+\$
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4. \$	3,414.88	\$\$

Debt	or 1	Iwona Perna		Cas	se number (if known)	2:23-bk-13	081	
				F	or Debtor 1	For Debtor		
	C	y line 4 here	4	_	3,414.88	non-filing	spouse ,859.20	
	Cop	y line 4 nere	4.	Ъ.	3,414.00	\$ <u> </u>	,009.20	
5.	List	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	628.33	\$	855.77	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	230.21	
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	0.00	
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	0.00	
	5e.	Insurance	5e. 5f.	\$	867.03 0.00	\$ \$	0.00	
	5f. 5g.	Domestic support obligations Union dues	5ı. 5g.	Φ.	0.00	\$	0.00	
	5h.	Other deductions. Specify:	5h.+	\$	0.00	·	0.00	
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	– 6.	\$	1,495.36		,085.98	
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	1,919.52		,773.22	
7 . 8.		all other income regularly received:	٠.	Ψ	1,010.02	Ψ	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Ο.	8a.	Net income from rental property and from operating a business,						
		profession, or farm						
		Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total						
		monthly net income.	8a.	\$	0.00	\$	0.00	
	8b.	Interest and dividends	8b.	\$	0.00	\$	0.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent						
		regularly receive Include alimony, spousal support, child support, maintenance, divorce						
		settlement, and property settlement.	8c.	\$	0.00	\$	0.00	
	8d.	Unemployment compensation	8d.	\$	0.00	\$	0.00	
	8e.	Social Security	8e.	\$	0.00	\$ 1	,920.10	
	8f.	Other government assistance that you regularly receive						
		Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental	!					
		Nutrition Assistance Program) or housing subsidies.						
		Specify:	_ 8f.	\$	0.00	\$	0.00	
	8g.	Pension or retirement income	8g.	\$	0.00	\$	365.99	
	8h.	Other monthly income. Specify:	_ <sup>8h.+</sup>	\$	0.00	+ \$	0.00	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	2,286.09	
		v						<u> </u>
10.	Calo	culate monthly income. Add line 7 + line 9.	10. \$		1,919.52 + \$	4,059.31	= \$	5,978.83
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.				•		Ĺ
11.	Stat	e all other regular contributions to the expenses that you list in <i>Schedule</i>	J.					
		ide contributions from an unmarried partner, members of your household, your	depen	den	ts, your roommates	s, and		
		r friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a	availab	le to	pav expenses list	ed in Schedul	e J.	
	Spe						+\$	0.00
10	ام ۸	the emount in the last column of line 10 to the emount in line 11. The rec	ult in th		ambined menthly is	20000		
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certai			•			
	app	· · · · · · · · · · · · · · · · · · ·				12.	\$	5,978.83
							Combin	ied
	_		_					y income
13.	_ `	/ou expect an increase or decrease within the year after you file this form? No.	?					
		Yes. Explain:						
	_	' <u> </u>						

Fill in this information to identify your case:				
Debtor 1 Iwona Perna		Check	if this is:	
IWOIIA FEITIA	<del></del>		n amended filing	
Debtor 2 (Spouse, if filing)			supplement show spenses as of the	ving postpetition chapter 1:
(Opodae, ir illing)			cpenses as or the	Tollowing date.
United States Bankruptcy Court for the: <u>EASTERN DISTRICT OF PENN</u>	ISYLVANIA	M	M / DD / YYYY	
Case number 2:23-bk-13081				
(If known)				
Official Form 106J				
Schedule J: Your Expenses				42/4
Be as complete and accurate as possible. If two married people information. If more space is needed, attach another sheet to this (if known). Answer every question.				
Part 1: Describe Your Household				
1. Is this a joint case?				
<ul><li>☑ No. Go to line 2.</li><li>☐ Yes. Does Debtor 2 live in a separate household?</li></ul>				
☐ No ☐ Yes. Debtor 2 must file Official Form 106J-2, <i>Expens</i>	es for Separate Household o	of Debto	r 2.	
2. Do you have dependents?  No				
Do not list Debtor 1 and Yes. Fill out this information for	Dependent's relationship	ı to	Dependent's	Does dependent
Debtor 2. each dependent	Debtor 1 or Debtor 2		age	live with you?
Do not state the	Snouse		60	□ No
dependents names.	Spouse			⊠ Yes □ No
				Yes
				□ No □ Yes
				□ No
3. <b>Do your expenses include</b> ⊠ No				☐ Yes
expenses of people other than Yes				
yourself and your dependents?				
Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless expenses as of a date after the bankruptcy is filed. If this is a surapplicable date.  Include expenses paid for with non-cash government assistance value of such assistance and have included it on Schedule I: Yo (Official Form 106I.)	pplemental <i>Schedule J</i> , ch e if you know the			f the form and fill in the
(Sindari Sini 100i.)			Tour expe	
4. The rental or home ownership expenses for your residence payments and any rent for the ground or lot.	. Include first mortgage	4. \$		1,145.83
If not included in line 4:				
4a. Real estate taxes		4a. \$		0.00
4b. Property, homeowner's, or renter's insurance				0.00
4c. Home maintenance, repair, and upkeep expenses				
<ul><li>4d. Homeowner's association or condominium dues</li><li>5. Additional mortgage payments for your residence, such as h</li></ul>		4d. \$ 5. \$		0.00 267.00
o. Additional mongage payments for your residence, such as i	ionio oquity iounis	J. Þ		201.00
6. Utilities:		O		275.00
<ul><li>6a. Electricity, heat, natural gas</li><li>6b. Water, sewer, garbage collection</li></ul>				
6c. Telephone, cell phone, Internet, satellite, and cable service				
6d. Other. Specify:		6d. \$		0.00

	Iwona Perna	Case number (if kno	own) <u>2:23-bk-13081</u>
Foo	d and housekeeping supplies	7. \$	1,100.00
Chil	dcare and children's education costs	8. \$	0.00
Clot	hing, laundry, and dry cleaning	9. \$	100.00
	sonal care products and services		100.00
	ical and dental expenses	11. \$	250.00
. Trar	sportation. Include gas, maintenance, bus or train fare.	· · · · · · · · · · · · · · · · · · ·	
	ot include car payments.	12. \$	300.00
Ente	ertainment, clubs, recreation, newspapers, magazines, and books		100.00
Cha	ritable contributions and religious donations	14. \$	100.00
Insu	rance.		
	not include insurance deducted from your pay or included in lines 4 or 20.		
	Life insurance	15a. \$	0.00
	Health insurance	15b. \$	0.00
	Vehicle insurance	15c. \$	145.58
	Other insurance. Specify: AC Units	15d. \$	10.00
	es. Do not include taxes deducted from your pay or included in lines 4 or 20.		
Spe		16. \$	0.00
	allment or lease payments:		
	Car payments for Vehicle 1	· · · · · · · · · · · · · · · · · · ·	0.00
	Car payments for Vehicle 2		0.00
	Other. Specify: AC Units		257.00
	Other. Specify:		0.00
	r payments of alimony, maintenance, and support that you did not report		0.00
	ucted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106 er payments you make to support others who do not live with you.		0.00
Spec		\$ 19.	0.00
	ony. Er real property expenses not included in lines 4 or 5 of this form or on So		me
	Mortgages on other property	20a. \$	0.00
	Real estate taxes		0.00
	Property, homeowner's, or renter's insurance	200 €	0.00
	Maintenance, repair, and upkeep expenses		0.00
	Homeowner's association or condominium dues	20d. \$ 20e. \$	0.00
	Specific Constant Conditional Francis	24	1,000.00
	icle Registration and Maintenance		125.00
	-		123.00
	ulate your monthly expenses		
	Add lines 4 through 21.	.   \$	5,955.14
22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-	2 \$	
22c.	Add line 22a and 22b. The result is your monthly expenses.	\$	5,955.14
Cale	culate your monthly net income.		
	Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	5,978.83
	Copy your monthly expenses from line 22c above.	23b\$	5,955.14
200.	339) 134. Monthly expended from the 220 above.	∠SDΦ	J,9JJ.14
	Subtract your monthly expenses from your monthly income.		
230	The result is your <i>monthly net income</i> .	23c. \$	23.69
23c.			
. <b>Doy</b> For e	rou expect an increase or decrease in your expenses within the year after xample, do you expect to finish paying for your car loan within the year or do you expect y fication to the terms of your mortgage?		o increase or decrease because

Fill in this infor	ll in this information to identify your case:				
Debtor 1	Iwona Perna				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	F PENNSYLVANIA		
Case number	2:23-bk-13081				
(if known)				Check if this is an amended filing	

#### Official Form 106Dec

# **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

	Sign Below	
Dic	d you pay or agree to pay someone who is NOT an attorn	y to help you fill out bankruptcy forms?
$\boxtimes$	No	
	Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
that	der penalty of perjury, I declare that I have read the sumn t they are true and correct.	
-	/s/ Iwona Perna	_ X
	Iwona Perna	Signature of Debtor 2
	Signature of Debtor 1	